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## **UTILITY** PATENT APPLICATION **TRANSMITTAL**

Attorney Docket No.	200
First Inventor	i i i
Title	
Express Mail Label No.	

(Only for new nonprovision	nal applications under 37 CFR 1.53(b))	Express Mail Label No.	
	TION ELEMENTS	ADDRESS TO: Bo	sistant Commissioner for Patents ox Patent Application
1. Fee Transmittal For (Submit an original and a constitution)  2. Applicant claims Sign See 37 CFR 1.27.  3. Specification (preferred arrangement)  - Descriptive title  - Cross Reference  - Statement Regalor - Reference to see or a computer por Background of Brief Summary	[Total Pages 7] set forth below) of the invention e to Related Applications arding Fed sponsored R & D equence listing, a table, rogram listing appendix the Invention of the Invention n of the Drawings (if filed) ption  Disclosure	7. CD-ROM or CD-R Computer Program 8. Nucleotide and/or Amino (if applicable, all necessa a. Computer Reada b. Specification Sequence i. CD-ROM ii. paper c. Statements veriff  ACCOMPANYING 9. Assignment Pape 10. (when there is an	ashington, DC 20231  in duplicate, large table or (Appendix) Acid Sequence Submission (ary) able Form (CRF) be Listing on: or CD-R (2 copies); or  lying identity of above copies  GAPPLICATION PARTS  ers (cover sheet & document(s)) Statement Power of Attorney on Document (if applicable)
5. Oath or Declaration  a. Newly exect Copy from a for continua  i. DELET Signed stanamed in 1.63(d)(2)  6. Application Data  18. If a CONTINUING APPLI	[ Total Pages 2  uted (original or copy) prior application (37 CFR 1.63 (d)) tion/divisional with Box 18 completed)  ION OF INVENTOR(S) tement attached deleting inventor(s) the prior application, see 37 CFR and 1.33(b).  Sheet. See 37 CFR 1.76  CATION, check appropriate box, and su	14. Should be specified Copy of (if foreign priority)  16. Nonpublication F (b)(2)(B)(i). Applior its equivalent.  17. Other:	PTO-1449 Citations Indment Postcard (MPEP 503) Indically itemized) Indically itemized Ind
Box 5b, is considered a part of The incorporation can only be	Divisional Continuation-in-part (CIP  Examiner  ONAL APPS only: The entire disclosure of the disclosure of the accompanying continuity relied upon when a portion has been inadv  19. CORRESPON	Group Art Uni the prior application, from which an nuation or divisional application and	is hereby incorporated by reference.
Customer Number or Bar Co	arronn Lee Pesni		Correspondence address below
Address City Country	3022 Francisca Arlington USA To	n Drive, # 1/38 State Texas elephone 817-468-170	Zip Code <b>76015</b>
Name (Print/Type)	arronn Lee Pesnell	Registration No. (Attorn	ey/Agent)  Date 1-17-02
Signature	Homme le ferrel	<u> </u>	Date   1-11

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PTO/SB/17 (11-01)
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FEE TRANSMITTAL  for FY 2002  Patent fees are subject to annual revision.  Applicant claims small entity status. See 37 CFR 1.27		Complete if Known					
		Application Number					
		Filing Date					
		First Named Inventor	Arronn Lee Pesnell				
		Examiner Name					
		Group Art Unit					
TOTAL AMOUNT OF PAYMENT	(\$)	Attorney Docket No.					

METHOD OF PAYMENT (check all that apply)	FEE CALCULATION (continued)					
	2 ADDITIONAL FEES					
Check Credit card Money Other None	Large Entity  Small Entity					
Deposit Account.		Fee	Fee	Fee	Fee Description	Fee Paid
Deposit Account		(\$)	Code	(\$)	ree Description	
Number	105 1	130	205	65	Surcharge - late filing fee or oath	
Deposit Account Name	127	50	227	25	Surcharge - late provisional filing fee or cover sheet	
The Commissioner is authorized to: (check all that apply)	139	130	139	130	Non-English specification	
Charge fee(s) indicated below Credit any overpayments	147 2,	520	147 2	,520	For filing a request for ex parte reexamination	
Charge any additional fee(s) during the pendency of this application  Charge fee(s) indicated below, except for the filing fee	112	920*	112 9	20*	Requesting publication of SIR prior to Examiner action	
to the above identified deposit account	113 1,	840*	113 1,	840*	Requesting publication of SIR after	
FEE CALCULATION					Examiner action	
1. BASIC FILING FEE		110		55	Extension for reply within first month	
Large Entity   Small Entity		400		200	Extension for reply within second month  Extension for reply within third month	
Fee Fee Fee Fee <u>Fee Description</u> Code (\$)   Code (\$)   Fee Paid		920		160 720	Extension for reply within fourth month	
101 740 201 370 Utility filing fee 370.00	118 1,					
106 330 206 165 Design filing fee	128 1,	-	228 9		Extension for reply within fifth month	
107 510 207 255 Plant filing fee		320		160	Notice of Appeal	
108 740 208 370 Reissue filing fee	1	320		160	Filing a brief in support of an appeal	
114 160 214 80 Provisional filing fee	į.	280		140	Request for oral hearing	
SUBTOTAL (1) (\$) 3 70.00	138 1,510 138 1,510 Petition to institute a public use proceeding					
2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE		110	240	55	Petition to revive - unavoidable	
Fee from				640	Petition to revive - unintentional Utility issue fee (or reissue)	
Extra Claims below Fee Paid		,280 460		340 230	Design issue fee	
Total Claims	1	620		310	Plant issue fee	
Claims	ŀ	130		130⁄	Petitions to the Commissioner	
Multiple Dependent	123	50	123	50	Processing fee under 37 CFR 1 17(q)	
Large Entity   Small Entity		180	l	180	Submission of Information Disclosure Stmt	
Fee Fee Fee Fee Description		,				
Code (\$)   Code (\$)   103 18   203 9   Claims in excess of 20	581	40	581	40	Recording each patent assignment per property (times number of properties)	
102 84 202 42 Independent claims in excess of 3	146	740	246	370	Filing a submission after final rejection (37 CFR § 1.129(a))	
104 280 204 140 Multiple dependent claim, if not paid	149	740	249	370	For each additional invention to be	
109 84 209 42 ** Reissue independent claims over original patent					examined (37 CFR § 1.129(b))	
110 18 210 9 ** Reissue claims in excess of 20	179	740	279	370	Request for Continued Examination (RCE)	
and over original patent		900	169	900	Request for expedited examination of a design application	
SUBTOTAL (2)	Other fo	ee (s	pecify)			
**or number previously paid, if greater, For Reissues, see above	*Reduc	ced by	y Basic	Filing	Fee Paid SUBTOTAL (3) (\$) 3	10.00

SUBMITTED BY		Complete (if	Complete (if applicable)		
Name (Print/Type)	Orronn Lee Pesnell	Registration No. (AttomeylAgent)	Telephone	817-468-1708	
Signature	Horom be Persell		Date	1-17-02	

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